CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS COVER PAGE

Date Received

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ME OF FILER	(LAST)	(FIRST)	/ Man Resou(Middle) Division
Office Assessment	The state of the s	Cichard	Danell .
	Jourt		
Agency Name CalPERS			
Division, Board, Departmen	t, District, if applicable	Your Position	2
Investment	<i>y</i>	Senior P	Portfolio Manager
▶ If filing for multiple positi	ons, list below or on an attachmer		
Agency:		Position:	
Jurisdiction of Offi	Ce (Check at least one box)		
State	,	☐ Judge (State	wide Jurisdiction)
Multi-County		County of	
·		_ ,	
		0007	
A	•	_	
Annual: The period co	overed is January 1, 2010, through	December 31, Leaving Off (Check one)	fice: Date Left/
The period covered 2010.	is, through	December 31, O The peri- leaving of	od covered is January 1, 2010, through the date of ffice.
Assuming Office: Da	te/	The periodof leaving	od covered is/, through the date g office.
Candidate: Election Y	ear Office	e sought, if different than Part 1:	
Schedule Summary			
Check applicable schedule	es or "None."	► Total number of page	s including this cover page:
Schedule A-1 - Investn	nents - schedule attached	Schedule C - Inco	me, Loans, & Business Positions - schedule attached
		Schedule D - Inco	me – Gifts – schedule attached
Schedule B - Real Pro	perty – schedule attached	☐ Schedule E - Inco	me - Gifts - Travel Payments - schedule attached
/erification			· · · · · · · · · · · · · · · · · · ·
-	•		nt.
certify under penalty of p	erjury under the laws of the Sta	te of California that the	
loto Signed 3-3	51-2011	Signatura	
rate Signed	(month, day, year)	Signature	
	Office, Agency, or Called Agency Name Called Agency Name Called Agency Name Called Agency: Division, Board, Department of the State	Office, Agency, or Court Agency Name CalPERS Division, Board, Department, District, if applicable In vestment If filling for multiple positions, list below or on an attachment Agency: Jurisdiction of Office (Check at least one box) State Multi-County City of Type of Statement (Check at least one box) Annual: The period covered is January 1, 2010, through 2010. -or- The period covered is, through 2010. Assuming Office: Date, through 2010. Candidate: Election Year Office Schedule A-1 - Investments - schedule attached Schedule A-2 - Investments - schedule attached Schedule B - Real Property - schedule attached None - No reserved in the state of t	Office, Agency, or Court Agency Name CalFES Division, Board, Department, District, if applicable In westment If filling for multiple positions, list below or on an attachment. Agency: Jurisdiction of Office (Check at least one box) State Multi-County City of Type of Statement (Check at least one box) Annual: The period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of leaving of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31, Check one of the period covered is January 1, 2010, through December 31,

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

(Ownership Interest is Less Than 10%) Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name Richard Roth

► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Sempra Energy	British Peopleum
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GÉNERAL DESCRIPTION OF BUSINESS ACTIVITY
ENERGY distribution	energy
	FAIR MARKET VALUE
\$2,000 - \$10,000 \$\infty\$ \$10,001 - \$100,000 \$\infty\$ \$100,001 - \$1,000,000 \$\infty\$ Over \$1,000,000	\$2,000 - \$10,000
	[] Cyel \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other Other
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
NAME OF BUSINESS ENTITY American Express	NAME OF BUSINESS ENTITY CISCO YS HEMS
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Sarviers	network equipment
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$100,000 \$100,000 Over \$1,000,000	☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000 .
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
Amerpose Financial	Deven there y
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Financial Services	natural gas production
FAIR MARKET VALUE	FAIR MARKET VALUE
☐ \$2,000 - \$10,000	\$2,000 - \$10,000
S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
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	ACQUIRED DISPOSED
NO GOTTON	NOGOTILE DIOFOGED
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA F	STATE OF THE PARTY
Name	Roth

NAME OF BUSINESS ENTITY Exxan Mob. (NAME OF BUSINESS ENTITY A las Corp
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
oil exploration + production	media
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$2,000 - \$10,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE: Frederick a Lgusition 1 10 10 Energy	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED holdengs	
NAME OF BUSINESS ENTITY Wat Stran	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	Marke + Co. GENERAL DESCRIPTION OF BUSINESS ACTIVITY
Ente turnet	phormaceaticals
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	\$10,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT Stock Other
(Describe) Partnership () Income Received of \$0 - \$499	(Describe) Partnership (Income Received of \$0 - \$499)
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	$\frac{1}{10}$ $\frac{3a\eta}{10}$ $\frac{10}{10}$
	ACQUIRED DISPOSED
MAME OF BUSINESS ENTITY Gabelli Clabel Media Trist	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
censed en of find	athlike quipment
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000	∑ \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
ACQUIRED DISPOSED	ACQUIRED DISPOSED
Comments:	

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name

Reckishine Hathaway	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/	
Medeo Health Cornes	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$\sqrt{2}\\$2,000 - \$10,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	NATURE OF INVESTMENT Stock Other (Describe) Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	/
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE \$2,000 - \$10,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Stock Other (Describe)	NATURE OF INVESTMENT Stock Other (Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
Comments:	

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FOR	SERVICE SERVICE SERVICES
Name	
Richard	Roth

STREET ADDRESS OR PRECISE LOCATION	► STREET ADDRESS OR PRECISE LOCATION
2101 S. Beverly Glan Blood	
LOS Avigeles	CITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 \$500 - \$1,000	\$0 - \$499
\$10,001 - \$100,000 OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
Justin Dickerson	
	lending institutions made in the lender's regular course lic without regard to your official status. Personal loans business must be disclosed as follows:
NAME OF LENDER*	NAME OF LENDER*
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF LENDER	BUSINESS ACTIVITY, IF ANY, OF LENDER
INTEREST RATE TERM (Months/Years)	INTEREST RATE TERM (Months/Years)
%	%
HIGHEST BALANCE DURING REPORTING PERIOD	HIGHEST BALANCE DURING REPORTING PERIOD
\$500 - \$1,000 \$1,001 - \$10,000	\$500 - \$1,000 \$1,001 - \$10,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
Guarantor, if applicable	☐ Guarantor, if applicable
Comments:	